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27910 7590 09/22/2004

**STINSON MORRISON HECKER LLP**  
**ATTN: PATENT GROUP**  
**1201 WALNUT STREET, SUITE 2800**  
**KANSAS CITY, MO 64106-2150**

12/22/2004 AWONDAF2 00000017 09937902

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Lara Sunday (Depositor's name)  
Lara Sunday (Signature)  
December 16, 2004 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/937,902	02/27/2002	Michael David Boyd	JHMI.00015	7123

TITLE OF INVENTION: ACCESS PANEL

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	<del>\$665</del> \$700.	\$0	<del>\$665</del> \$700.	12/22/2004
EXAMINER	ART UNIT	CLASS-SUBCLASS			
AMIRI, NAHID	3635	052-220800			

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  
☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 James H. Marsh, Jr.  
 2 Stinson Morrison Hecker  
 3 LLP

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Cabspace Holdings Pty Ltd

Victoria, Australia

12/22/2004 AWONDAF2 00000010 09937902

01-FC:1501  
 02-FC:1504

1400.00 DP  
 300.00 DP

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

☒ Issue Fee  
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☐ A check in the amount of the fee(s) is enclosed.  
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☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 19-4409 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature James H. Marsh, Jr.  
 Typed or printed name James H. Marsh, Jr.

Date 12-16-04  
 Registration No. 24,533

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